920997

FORM D

SEC Wail Processing Section

APR 162008

Washington, DC

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response 16.00

SEC USE ONLY						
Prefix		Serial				
DA*	TE RECEIV	/ED				

	_
Name of Offering (check if this is an amendment and name has changed, and indicate changed the change of the chan	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) DULOE PROCESSED
Type of Filing: ☑ New Filing ☐ Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THOMSON REUTERS
Tumac Lumber Co., Inc.	Telephone Number (Including Area Code)
Address of Executive Offices (Number and Street, City, State, Zip Code)	503-226-6661
805 SW Broadway, Suite 1700, Portland, OR 97205	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Wood products company	
	1/23111 88181 (2/11 88111 87176 81181 8727 81181 2737 1881
Type of Business Organization	
Di Comporation — —	er (please s;
☐ business trust ☐ limited partnership, to be formed	00040331
Month Year	
Actual or Estimated Date of incorporation of Organization.	ctual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	State:
CN for Canada; FN for other foreign jurisdicti	on) O R
GENERAL INSTRUCTIONS .	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation 77d(6).	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the off and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address gi which it is due, on the date it was mailed by United States registered or certified mail to that address.	ering. A notice is deemed filed with the U.S. Securities wen below or, if received at that address after the date of
17here to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	49.
Copies Required : Five (5) copies of this notice must be filed with the SEC, one of which must be ma	mually signed. Any copies not manually signed must be

Filing Fee: There is no federal filing fee.

not be filed with the SEC.

photocopies of the manually signed copy or bear typed or printed signatures.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☑ Director ☐ General and/or ☑ Beneficial Owner Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) McMurchie, Bradley M. Business or Residence Address (Number and Street, City, State, Zip Code) 805 SW Broadway, Ste 1700, Portland, OR 97205 ☐ General and/or □ Beneficial Owner Executive Officer □ Director Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) Leipzig, Timothy J. Business or Residence Address (Number and Street, City, State, Zip Code) 805 SW Broadway, Ste 1700, Portland, OR 97205 ☑ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Williams, Mark E. Business or Residence Address (Number and Street, City, State, Zip Code) 805 SW Broadway, Ste 1700, Portland, OR 97205 Executive Officer ☑ Director ☐ General and/or ☐ Promoter ☑ Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Gustafson, Thomas R. Business or Residence Address (Number and Street, City, State, Zip Code) 805 SW Broadway, Ste 1700, Portland, OR 97205 ☐ Promoter ☑ Beneficial Owner Director ☐ General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Meisner, Kyle E. Business or Residence Address (Number and Street, City, State, Zip Code) 805 SW Broadway, Ste 1700, Portland, OR 97205 ■ Beneficial Owner □ Executive Officer Director ■ Director ☐ General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) McCracken, Paul N. Business or Residence Address (Number and Street, City, State, Zip Code) 805 SW Broadway, Ste 1700, Portland, OR 97205 ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. 1	NFORMA	TION AB	OUT OFFI	ERING					
												Yes	No
1. I	las the issuer	sold, or do								144144144444444		•	Ø
				swer also i									
2.	2. What is the minimum investment that will be accepted from any individual?						•••••	S 5,4					
	Does the offer	.i	inint auman	hin of a c	inala unit?							Yes □	No ⊠
	Enter the info											_	_
C I S	commission of a person to states, list the broker or de	r similar re be listed is name of t	emuneration an associat he broker o	n for solicit ed person c or dealer.	tation of pu or agent of a If more tha	urchasers in a broker or an five (5)	connection dealer regis persons to	n with sale stered with be listed a	s of securit the SEC an	ies in the o d/or with a	ffering. state or		
Full Na	me (Last nam	e first, if in	dividual)										
D '	s or Residenc		(N)h.aa.	od Stenet C	Store Store	7in Code)						<u> </u>	
Busines	s or Resident	c Auuress	(Number a	id Sireet, C	ny, siate, 2	Lip Couc)							
Name o	f Associated	Broker or I	Dealer			-							
States in	n Which Pers	on Listed H	Ins Solicite	d or Intend	s to Solicit	Purchasers							 -
	ck "All State								*********		*****	all:	States
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
(IL)	[IN]	(IA)	[KS]	[KY]	[LA]	(ME)	(MD)	(MA) (ND)	[MI] [HO]	[MN] [OK]	(MS)	(MO (PA	
[MT]	(NE) (SC)	(NV) [SD]	[NH] [TN]	[NJ] [TX]	(MM) (UT)	(NY) [VT]	(NC) [VA]	(WA)	(WV)	[WI]	[WY]	[PR	-
	me (Last nan			nd Street, C	City, State, 2	Zip Code)					<u> </u>		
Name o	of Associated	Broker or I	Dealer		<u> </u>		<u></u>				 -		
States i	n Which Pers	on Listed F	las Solicite	d or Intend	s to Solicit	Purchasers							
_	ck "All State							*******	*****			. 🗆 All	States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	-
[IL]	(IN)	(AI)	[KS]	[KY]	[LA]	[ME]	[MD]	[AM] [DN]	[MI] [OH]	(MN) (OK)	(MS) (OR)	(MO (PA	-
(MT) (RI)	(NE) (SC)	(NV) (SD)	[NH] [TN]	[NJ] [TX]	(NM) [UT]	(NY) (VT)	(NC) [VA]	(WA)	(WV)	(WI)	(WY)	(PR	-
Full Na	me (Last nan	ne first, if it	ndividual)										
								<u> </u>					
Busine	ss or Residen	ce Address	(Number a	nd Street, C	City, State,	Zip Code)		•					
Name o	of Associated	Broker or	Dealer										
	n Which Pers												
(Che	eck "All State	s" or checi	k individua		**************								
[AL]	(AK)	(AZ) (IA)	[AR] [KS]	[CA] [KY]	(CO) (LA)	(CT) [ME]	(DE) [MD]	[DC] [MA]	(FL) (MI)	(GA) (MN)	(HI) (MS)	[II] [MC]	•
(IL) (MT)	[IN] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	(PA	N)
(RI)	(SC)	(SD)	(TN)	(TX)	[UT]	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	{PF	₹]

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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	CEE	DS	_	_	
I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	٠	A correcte	Δ	mount	Already
	Type of Security		Aggregate Tering Price	^	So	
	Debt	S		S		
	Equity	s _	1,772,183	S		251,606
	☑ Common □ Preferred					
	Convertible Securities (including warrants)	S _		S		
	Partnership Interests	S		\$	_	
	Other (Specify)	S	<u> </u>	S		
	Total	s _		S		
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors		Dollar of Pu	regate Amount irchases
	Accredited Investors	_				251,606
	Non-accredited Investors	_	0	S		0
	Total (for filings under Rule 504 only)	_		S		
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		Type of	1	Dollar .	Amount
	Type of Security		Security		So	old
	Rule 505	_		S		
	Regulation A	_		S		
	Rule 504	_		S		
	Total			S		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			S		
	Printing and Engraving Costs		0	\$	<u> </u>	
	Legal Fees		8	5	<u> </u>	3,000
	Accounting Fees		0	5	<u></u>	
	Engineering Fees		_	5		
	Sales Commissions (specify finders' fees separately)		0	5	<u> </u>	
	Other Expenses (identify)		п	•		

3,000

⊠ S___

C. OFFERING PRIC	E. NUMBER OF INVESTORS, EXPENSES AND I	USE OF PRO	CEEDS		
and total expenses furnished in response to Pa	b. Enter the difference between the aggregate offering price given in response to Part $C \rightarrow Question$ and total expenses furnished in response to Part $C \rightarrow Question$ 4.a. This difference is the "adjusted gros proceeds to the issuer."				248,606
each of the purposes shown. If the amount	oss proceeds to the issuer used or proposed to be for any purpose is not known, furnish an estin total of the payments listed must equal the adjust 2art C - Question 4,b above.	rate and ed gross			
	· :	Đ	ayments to Officers, frectors, & Atfiliates	Pa	yments To Others
Salaries and fees		🗖 \$		□ \$ <u> </u>	
		🗆 S		□ \$	
Purchase, rental or leasing and installation of and equipment	of machinery	🗖 S		□ \$	
Construction or leasing of plant buildings at	nd facilities	🗆 S		□ \$	
Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	he value of securities involved in this it assets or securities of another	🗀 S		s	
•				□ s	<u>,</u>
· ·					248,600
Other (specify):		🗆 S		□ \$	
		 		□ \$	
Total Payments Listed (column totals added	l)	•••	Ø \$	248,600	<u> </u>
	D. FEDERAL SIGNATURE	··· <u>·</u> ···		. 	
The issuer has duly caused this notice to be signature constitutes an undertaking by the issue the information furnished by the issuer to any non-signature.	ed by the undersigned duly authorized person. If the formula to the U.S. Securities and Exchange	e Commissio	filled under l n, upon writt	Culc 505, t en re-quest	he following of its staff
Issuer (Print or Type)	Signature	1	Inte		
Tumac Lumber Co., Inc.	1//		April <u>9</u> , 200	8	
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
Timothy J. Leipzig	Chief Financial Officer				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)